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TO: Amendment Section Division of Corporations

NAME OF CORPORAT	Lennard High Scholon:	of Choral Boosters Inc	: 	
DOCUMENT NUMBER:				
The enclosed Articles of Ar	mendment and fee are sub	omitted for filing.		
Please return all correspond	lence concerning this mat	ter to the following:		
Chior Director				
		(Name of Contact Pe	erson)	
Lennard High School Chor	al Boosters			
		(Firm/ Company	·)	
2342 E Shell Point Road				
		(Address)		
Ruskin FL 33570				
		(City/ State and Zip (Code)	
LennardHighChours@gma	il.com			
· · · · · · · · · · · · · · · · · · ·	-mail address: (to be use	d for future annual rep	ort notification	n)
For further information con-	cerning this matter, pleas	e call:		
Jennifer Wescott		at	813	394-3714
	(Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the	following amount made p	ayable to the Florida I	Department of	State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certifi Certifi	Diffing Fee cate of Status ed Copy tional Copy is sed)
Mailing A	Address	Str	eet Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Lennard High School Choral Boosters Inc.		22 2-
(Name of Corporation as currently filed with the Florida I	Dept. of State)	7. 2.5
(Document Numb	er of Corporation (i	f known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:	
N/A		The new
N A name must be distinguishable and contain the word "corpora" "Company" or "Co." may not be used in the name.	tion" or "incorpora	ted" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	H/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
	D / 3.	
D. If amending the registered agent and/or registered office		la, enter the name of the
new registered agent and/or the new registered office a		
Name of New Registered Agent: \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		
New Registered Office Address:		(Florida street address)
		. Florida
	(City)	(Zip Code)
lew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fair	Agent: niliar with and acce	pt the obligations of the position.
Sic	anature of New Rev	istered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange X Remove X Add	PT John Do Y Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add Remove	<u>T</u>	Beth Luke	14310 Colonial Affair St Ruskin FL 33573
2) Change Add	<u>P</u>	Jacqueline Torres-Gonzalez	11603 Misty Isle Lane Riverview FL 33579
* Remove 3) * Change Add Remove	<u>TS</u>	Jennifer Wescott	12424 Bramfiled Drive Riverview FL 33579
4) Change Add	<u>P</u>	Jennifer McLaughlin	162 Star Shell Drive Apollo Beach Fl. 33572
Remove 5)Change Add Remove			
6) Change Add			
E. If amending or addin (attach additional shee.		cles, enter change(s) here: (Be specific)	

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TL.	data of	·/-> - 4 4		era a a a
date	this document was signed	(s) adoptio	n:	_, if other than the
uaic	uns document was signed			
Effe	ctive date <u>if applicable</u> :	7/30/2021		
			(no more than 90 days after amendment file date)	
Note docu	e: If the date inserted in the iment's effective date on the	is block doe	es not meet the applicable statutory filing requirements, this date will not be	oc listed as the
Ado	ption of Amendment(s)		(CHECK ONE)	
	The amandment(s) west-	uma odone. I	by the mumbers and the number of victor and for the new Array S	
Ц	was/were sufficient for ap	сте adopted pproval.	by the members and the number of votes cast for the amendment(s)	

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 7/28/21
Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Jacqueline Torres-Gonzalez
(Typed or printed name of person signing)
Outgoing President
(Title of person signing)